ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	Mr. G		10/27/00
FEE DETERMINATION		19 63100	
O.I.P.E. CLASSIFIER		857	11/17/00
FORMALITY REVIEW	LJ		
RESPONSE FORMALITY REVIEW	MT	523	04/13/01

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
— (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim		Date						
Final	Original							
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If more than 150 claims or 10 actions
staple additional sheet here

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